PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

09/978524

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
-	OTAL CLASS	·	(Column 1)		(Colu	(Column 2)		TYPE		OF			
TOTAL CLAIMS			21					RATE	FEE	7	RATE	FEE	
FOR .			NUMBER FILED		NUMBER EXTRA		1	BASIC FE	370.00	ОР	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			2/ minus 20= *		*			X\$ 9=		OR	X\$18=	18	
INDEPENDENT CLAIMS), minus 3 = *		*			X42=		OR	\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-	<u> </u>	
М	ULTIPLE DEPE	NDENT CLAIM P	RESENT				+140=		1				
*1	f the difference	e in column 1 is	less than zero, enter "0" in			olumn 2	- 1	TOTAL	-	OR	L	~zj/;	
CLAIMS AS AMENDED - PART II								TOTAL		JOH	l	BN	
8	8-23-05 (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 21	Minus	<u>* 2</u>		= ()	11	X\$ 9=		OR	X\$18=	,	
AM	Independent FIRST PRESI	ENTATION OF MI	Minus	***	3 CLAIM	= ()	4 [X42=		OR	X84=		
h	13,			LIVELIVI	ODAM		4 [+140=.	200	OR	+280=		
•							L A	TOTAL ODIT, FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)	-	DD,11.1 EE ;					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		e		X\$ 9=		OR	X\$18=		
	Independent FIRST PRESE	* NTATION OF MU	Minus	ENDENT	CI AIRA	=	 	X42=		OR	X84=		
				Z. (SZIT)	JUNIN		, [+140=		OR	+280=		
							<u>.</u>	TOTAL			TOTAL		
		(Column 1)		(Columi	n 2) ((Column 3)		DDIT. FEE		٠.,	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	ST ER JSLY	PRESENT EXTRA	Ιг	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
2	Total	*	Minus	**				X\$ 9=		OR	X\$18=	- 155	
A A	Independent		Minus	***		= ·	I -	X42=		ŀ			
THIS PRESENTATION OF MULTIPLE DEPENDENT CLAIM										X84=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
	ne whiestum	uer Previously Paid	ror (Total or	Independent	l) is the h	ighest numbe	r found	in the appr	opriate box i	n colu	mn 1.	İ	